



State of South Carolina
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Assessment Shows Demand for Senior Services in Orangeburg County

(Columbia, S.C.) Assessments performed earlier this year by organizations involved in delivering home and community-based services to seniors on fixed incomes in Orangeburg County showed a substantial gap between the demand vs. the available funding for those services; a gap addressed by lawmakers in this year's state budget.

Beginning in December, a baseline amount of \$25,217 included in the current state budget for the Lt. Governor's Office on Aging will be available to purchase additional senior services and help address outstanding needs for seniors in each county in South Carolina. Additional funding for each county is available through a population-based formula used to distribute federal Aging dollars via 10 regional Area Agencies on Aging. All funds distributed must be used to purchase needed services for seniors documented on a central waiting list.

The plan submitted to the state for Orangeburg County includes 50 seniors currently on a waiting list for services. That number will likely grow, as more seniors in need are identified and added to a computer database that tracks individuals waiting for services, and those receiving them. Making sure that all seniors who need services are entered in the database is a crucial first step for the agencies involved, because tracking the healthcare outcomes of the individuals who receive these services will help policy makers gauge the impact of these types of programs when making tough spending decisions in the future.

Lt. Governor Andre' Bauer emphasized the importance of using new technology to link the state's investments in senior health with outcomes-based planning to address the coming senior boom in South Carolina when he testified before Congress on the reauthorization of the federal Older Americans Act in May.

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"We believe technology, data and research can allow us to make evidence-based decisions to give us the best results as we invest our scarce tax dollars," Bauer told the congressional committee debating the reauthorization bill. "South Carolina may be unique in its creation of a senior data cube, which links together large data bases so they may be cross referenced. Preliminary conclusions are showing a direct correlation between the intensity of Older Americans Act services and the avoidance of hospital ER use and in-patient admission. As we talk about reauthorizing the Older Americans Act, perhaps the major message is that while Older Americans Act services are not expensive programs, they are the foundation for programs and services that can save tax dollars."

Lawmakers in Columbia heard similar testimony during last year's state budget debates from numerous groups with a stake in those home and community-based services for seniors, including the AARP, the South Carolina Silver Haired Legislature, regional Area Agencies on Aging and leaders of county non-profit organizations and non-profit organizations who provide these services under contracts coordinated by the Office on Aging, and they responded with an additional \$2.9 million designed to address waiting lists for the kinds of services that can keep seniors healthy, independent and living in their own homes.

The non-recurring funds allocated by lawmakers will become available in December. In anticipation of that, Regional and county-level service providers worked with the State Aging Office to develop spending plans that addressed the twin priorities of reducing documented waiting lists and tracking the effectiveness of the dollars invested. Aging planners and policymakers are hopeful that carefully documenting both the increasing demand for these programs and their effectiveness may result in a permanent funding increase for such services in the future.

With South Carolina on course to see its senior population double during the next 15-20 years from current levels of around 650,000 to more than 1.3 million, targeted investments in programs that reduce nursing home admissions and allow seniors to remain healthy, independent and productive for longer will become increasingly critical. Increased emphasis on using sophisticated data collection and computer software to closely monitor the health of individual patients and the use of that data for evidence-based research that can improve health outcomes and help control costs will be an important factor in meeting this challenge.

An initiative of the Lt. Governor's Office on Aging, the South Carolina Senior Cube database is being developed in partnership with the State Office of Research and Statistics and the University of South Carolina's Arnold School of Public Health using a grant from the Duke Endowment. This unique-in-the-nation research tool gives participating health organizations and policymakers the ability to conduct in-depth research on the effect of various health interventions, programs and publicly-funded services on senior's health and direct limited resources to those that are proven to lead to better health outcomes and savings in healthcare dollars.